| OIPE   |                      | PART B         | - FEE(S)           | TRANSMIT   | TAL  | <b>-</b>                              |            |  |
|--|----------------------|----------------|--------------------|--|--|---------------------------------------|------------|--|
| Complete and send to   | his form, together w | applicable fee | e(s), to: <u>N</u> | Comn<br>P.O. F   | Stop ISSU<br>nissioner f<br>Box 1450<br>ndria, Vir   | FEE<br>or Patents<br>ginia 22313-1450 |            |  |
| \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\   |                      |                | or ]               | Eax (571) 2  | 273-2885   |                                       |            |  |
| INSTRUCTIONS. This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed wh appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" maintenance fee notifications.   |                      |                |                    |  |  |                                       |            |  |
| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)  Note: A certificate of mailing can only be used for domestic mailings of Fee(s) Transmittal. This certificate cannot be used for any other accompany   |                      |                |                    |  |  |                                       |            |  |
| 7590 09/15/2005  |                      |                |                    | papers. I<br>have its  | Note: A certificate of mailing can only be used for domestic mailings of Fee(s) Transmittal. This certificate cannot be used for any other accompany papers. Each additional paper, such as an assignment or formal drawing, m have its own certificate of mailing or transmission.  |                                       |            |  |
| Jones, Walker, Waechter, Poitevent, Carrere & Dengre, L.L.P. 4th Floor   |                      |                |                    |  | Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the Un States Postal Service with sufficient postage for first class mail in an envel addressed to the Mail Stop ISSUE FEE address above, or being facsim transmitted to the USPTO (571) 273-2885, on the date indicated below. |                                       |            |  |
| 8555 United Plaza Boulevard Baton Rouge, LA 70809  |                      |                |                    |  | Krjstine R. Crake (Depositor's na  |                                       |            |  |
| 12/20/2005 HVUONG2 00000121 501896 10715588  |                      |                |                    | TX.  | Restal Care (Signat  |                                       |            |  |
|  |                      |                |                    |  | December 14, 2005 (D   |                                       |            |  |
| 01 FC:1504   |                      |                | DINVENTOR          |  | ATTORNEY DOCKET NO.  | CONFIRMATION NO.                      |            |  |
| 10/715,588   | 11/18/2003           | Freddie W.     |                    |  | -  | 16706/97928-01                        | 4741       |  |
| TITLE OF INVENTION: INTERNAL TUBE GRIPPING DEVICE  |                      |                |                    |  |  |                                       |            |  |
| APPLN. TYPE  | SMALL ENTITY         | ISSUE FEE      |                    | PUBLICAT   | ION FEE  | TOTAL FEE(S) DUE                      | DATE DUE   |  |
| nonprovisional   | YES                  | \$700          |                    | \$30   | <b>X</b>   | \$1000                                | 12/15/2005 |  |
| EXAMINER   |                      | ART UNIT       |                    | CLASS-SUI  | BCLASS   | J                                     |            |  |
| KRAMER, DEAN J 3652  |                      |                |                    | 294-09   | 7000   |                                       |            |  |
| CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  Tree Address indication form PTO/SB/47: Pay 03-02 or more recent) attached. Use of a Customer.  |                      |                |                    | mes of up to 3 r<br>OR, alternatively<br>me of a single fir<br>attorney or agen<br>ed patent attorney  | Jones, Walker, Waechter 1 Poitevent, Carrere, & Denegre, L.L.P.  2 Denegre, L.L.P.  2 Denegre, L.L.P.  2 Denegre, L.L.P.  3 Denegre, L.L.P.  3 Denegre, L.L.P.   |                                       |            |  |
| 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  |                      |                |                    |  |  |                                       |            |  |
| PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  |                      |                |                    |  |  |                                       |            |  |
| (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)  |                      |                |                    |  |  |                                       |            |  |
| Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Governm  |                      |                |                    |  |  |                                       |            |  |
| 4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):   |                      |                |                    |  |  |                                       |            |  |
|  |                      |                |                    |  | amount of the fee(s) is enclosed. edit card. Form PTO-2038 is attached.  |                                       |            |  |
|  |                      |                |                    | The Director is hereby authorized by charge the required fee(s), or credit any overpayment posit Account Number 501896 (enclose an extra copy of this form). |  |                                       |            |  |
| 5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  |                      |                |                    |  |  |                                       |            |  |
| The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.  NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other part interest as shown by the records of the United States Patent and Trademark Office.  |                      |                |                    |  |  |                                       |            |  |
| Authorized Signature Jane Sear Date 14 DECOS   |                      |                |                    |  |  |                                       |            |  |
| Typed or printed name Lance A. Foster Registration No. 38,882  |                      |                |                    |  |  |                                       |            |  |
| This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to proc an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to comp this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 14 Alexandria, Virginia 22313-1450. |                      |                |                    |  |  |                                       |            |  |
| Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.  |                      |                |                    |  |  |                                       |            |  |
| PTOL 85 (Rev 07/05) Approved for use through 04/30/2007 OMB 0651 0033 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMER  |                      |                |                    |  |  |                                       |            |  |